FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



FORM

			UK-Z	DISCLOSURE /
COMMITTEE NAME (Must be same as on Statement of Organ	ization) # 6145	7	(Rev. 12/2005)	REPORT
IMPORTANT: Indicate by # type of committee you are reporting (1) Statewide/Legislative/Judge Standing for Retention Candidat (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (9) City PAC Subdivision PAC (11) Local Ballot Issue CANDIDATE COMMITTEES ONLY:	for: (2)State PAC (3)State Party andidate (7)School Board or Other		For Office Use Or Comm. # Logged In Scanned Computer Audited	145
Candidate Name	Political Party (if applicable)		File with:	
Office Sought	District (if Senate or House)		lowa Ethics and Disclosure Boan 510 E. 12 th , Ste. Des Moines, low Fax: 515-281-37	d 1A va 50319
Late reports are subject to possible civil and criminal penalties. F the candidate, for a candidate's committee, and the chairperson, individual responsible for filing timely and accurate reports.		(7) l		
SIGNATURE OF PERSON FILING REPORT	563-355-3 TELEPHONE	73	DATE SK	9 - 0 8 GNED
LAMERINGA JANUARY 19				
THE CONTRACTOR OF THE CONTRACT	REPORT FOR (1) ELECTION /(2) N		ECTION YEAR.	
(report date)	Indicate by #	ᆚ		
CHECK IF AMENDMENT TO REPORT DATED		ocal Co	ommittees, enter D	ate of Election
(You must continue to file reports until a DR-3 is filed.)	<u> </u>	-	& Local Committee lection is held	s, enter County in
CASH ON HAND at the beginning of the reporting period. (Total of committee. This amount MUST be the same as the cast of the last reporting period or must be zero if this is first	h on hand at the end		s 4	45,60
ADD TOTAL MONEY TAKEN IN THIS PERIOD				_
Schedule A: Cash Contributions total (Attach Schedule	e A) (*also see in-kind below)		/	61.79
Schedule F: Loans Received total (Attach Schedule F)			,	411
	***************************************			Ψ ' · ·
Schedule H: Total Sales of Campaign Property (Attach				<u> </u>
Schedule H: Total Sales of Campaign Property (Attach (Schedule H applies to Candidates' Com	Schedule H)			41, 11
	Schedule H)	••••••		
	Schedule H)	••••••		4, 1,
(Schedule H applies to Candidates' Com	Schedule H) mittees Only) SUB-TOTAL			
(Schedule H applies to Candidates' Com-	Schedule H) mittees Only) SUB-TOTAL	\$		
(Schedule H applies to Candidates' Com- SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (' Schedule F: Loan Repayments total (Attach Schedule I) CASH ON HAND at the end of this reporting period (if final report	Schedule H)			81.39
(Schedule H applies to Candidates' Com- SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule I) CASH ON HAND at the end of this reporting period (if final report be zero) (Attach DR-3)	Schedule H)			81.39
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (* Schedule F: Loan Repayments total (Attach Schedule B) CASH ON HAND at the end of this reporting period (if final report be zero) (Attach DR-3)	Schedule H)	\$		81,39
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (* Schedule F: Loan Repayments total (Attach Schedule I) CASH ON HAND at the end of this reporting period (if final report be zero) (Attach DR-3)	Schedule H) mittees Only) SUB-TOTAL **also see debts and loans below) F) balance must	\$ \$	5	81,39
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (* Schedule F: Loan Repayments total (Attach Schedule B) CASH ON HAND at the end of this reporting period (if final report be zero) (Attach DR-3)	Schedule H) mittees Only) SUB-TOTAL **also see debts and loans below) F) balance must	\$ \$	5	81,39
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (* Schedule F: Loan Repayments total (Attach Schedule I) CASH ON HAND at the end of this reporting period (if final report be zero) (Attach DR-3)	Schedule H) mittees Only) SUB-TOTAL **also see debts and loans below) F) balance must	\$ \$	5	81,39
Subtract total Money Spent This Period Schedule B: Expenditures total (Attach Schedule B) (* Schedule F: Loan Repayments total (Attach Schedule I) CASH ON HAND at the end of this reporting period (if final report be zero) (Attach DR-3)* "UNPAID BILLS (From Schedule D - Attach Schedule D) "IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E - Attach Schedule F - Attach Schedule F - CONSULTANT BREAKDOWN (Schedule G Attached?)	Schedule H)	\$ \$	5	81.39

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

	(Rev. 07/03)	MONETARY RECEIPTS
K		CK THIS BOX IF

SCHEDULE

COMMITTEE N	AME (Must be sa	ame as on Stat	tement of Org	ganization)∓(₀	145
	ERLLVISERU				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK		TO CANDIDATE* (if applicable)	RECEIVED	FUND- RAISER
	NUMBER		(ir applicable)		INCOME
	ID#			\$	
630107	CK#	Cloy Interest		1	L
apajor	ID#	11199		102	
111	CK#	GICU Interest			
6/30/07	ID#	OILL Interest		,03	
		·			
7/2/0/57	CK# 1386	Par Educ ASSOC		42.00	
1021	ID#	<u> </u>		12,00	
7/2/107	CK#	GICLI Interest		.02	
1131101	ID#	MICHA MICHAIT		,02	
abiles	CK#				
7/31/07		GICU Interest		123	
, ,	ID#				
8/31/07	CK#	BICU Interest		1182	
, , , , , , , , , , , , , , , , , , ,	ID#	1			
8/31/07	CK#	6104 Interest		r d	
9/3/101	ID#	C. Ca 1119 (19)		104	
012:1-	CK#	0.4.		_	
9 30/07		GICU Interest		102	
	ID#				
9/30/07	CK#	GICU Interest		,03	
	ID#				1
10/17/17	ск# 4-BLO	Tom Wolfe		25.00	
11101	– Ţ	1011 WILL	SUB-TOTAL	100	
		TOTAL 255		\$ 67.21	
		TOTAL (if last page	of this schedule)		

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

	(Rev. 07/03)	MONETARY RECEIPTS
nization) # (e145		CK THIS BOX IF NDING FORM

SCHEDULE

COMMITTEE NAME (Must be same as on Statement	of Organization)	#6145
GreatRiver UniServ Unit-Political	Hotion Con	amittee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/17/07	ID# Ск# 1405	Davenport Education Assoc		\$ 2764	
10/11/67	CK# \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Davenport Educ Asset		lole.75	
10/31/07	CK#	GICU		.02	
10/31/07	CK#	GILL		,04	
11/30/07	CK#	GICL		.02	
11/30/07	CK#	GILL		,04	
12/31/07	CK#	GICY		102	
12/31/07	CK#	GICU		,05	
	CK#				
	CK#		SUB-TOTAL	- OU 58	

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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FOR INSTRUCTIONS, SEE BACK OF FORM

1250.00	hartectantown)	SEMIORE H	Secretary Secretary
1 (3)	100		200
100	er e		
-			

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#		. The state of the	
	CK#			\$.
	ID#			
	CK#			
W-14	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	СК#			
	ID#			
	CK#			
			SUB-TOTAL	\$ 0.00
			TOTAL (if last page of this schedule)	\$ 200

THIS BOX APP	LIES TO	CANDIDA	ATES' COMI	AITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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